

Please type a plus sign [+] inside this box →



DECLARATION FOR UTILITY OR DESIGN		Attorney Docket No.		IN-5597
		First Named Inventor		John E. BOISSEAU et al.
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN		
<input type="checkbox"/> Declaration Submitted with initial Filing	or <input checked="" type="checkbox"/> Declaration Submitted after initial Filing (surcharge (37 CFR 1.16 (e)) required	Application Number		10/789,764
		Filing Date		February 27, 2004
		Group Art Unit		
		Examiner Name		

As below named inventor, I hereby declare that:
 My residence, post office address and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TEST METHOD FOR DETERMINING ETCH PERFORMANCE OF COATED SUBSTRATE
 (Title of the Invention)

The specification of which:

☐ is attached hereto

☒ Was filed on **February 27, 2004** as United States Application Serial Number **10/789,764**,
 was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35, U.S.C. § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365 (a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below, by checking the box, any foreign application(s) for patent or inventor's certificate, or any PCT international application(s) having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date DATE/MONTH/YEAR	Priority Not Claimed	Certified Copy Attached? Yes No
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application number are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

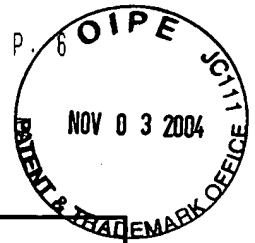
APPLICATION NUMBER(S)	FILING DATE	
60/451,220	February 28, 2003	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data Sheet PTO/SB/02B attached hereto

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. §120

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENT	PENDING	ABANDONED
PCT APPLICATION DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (If any)		

County	United States of America	Telephone	(248) 948-2021	Fax	(248) 948-2093
---------------	--------------------------	------------------	----------------	------------	----------------



IN-5597

DECLARATION —	Utility or Design Patent Application
----------------------	--------------------------------------

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<div style="border: 1px solid black; padding: 5px; text-align: center;"> 26922 PATENT-TRADEMARK OFFICE </div>	or <input type="checkbox"/> Correspondence address below
---	---	--

I, (WE), hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	John E.		Family Name or Surname
			BOISSEAU
Inventor's Signature	<i>John E. Boisseau</i>		Date
			11/1/04
Residence: City	Bloomfield Hills	State	Michigan
		Country	United State of America
		Citizenship	American
Mailing Address	2017 Birchland Drive		
City	Bloomfield Hills	State	Michigan
		Zip	48302

Name OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	Paul J.		Family Name or Surname
			DESKOVITZ
Inventor's Signature	<i>Paul J. Deskovitz</i>		Date
			11-1-04
Residence: City	Woodhaven	State	Michigan
		Country	United State of America
		Citizenship	American
Mailing Address	22100 Genesis Drive		
City	Woodhaven	State	Michigan
		Zip	48183

IN-5597

DECLARATION —	Utility or Design Patent Application
----------------------	---

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<div style="border: 1px solid black; padding: 5px; text-align: center;">26922 PATENT-TRADEMARK OFFICE</div>	or <input type="checkbox"/> Correspondence address below
---	--	--

I, (WE), hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF ADDITIONAL INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])	Donald H.			Family Name or Surname	CAMPBELL		
Inventor's Signature	<i>Donald H. Campbell</i>			Date	10/27/04		
Residence: City	Hartland	State	Michigan	Country	United State of America	Citizenship	American
Mailing Address	1211 Maxfield Lake Road						
City	Hartland	State	Michigan	Zip	48353		

[Page 3 of 8]

Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1 1]

IN-5597

DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label

26922
PATENT-TRADEMARK OFFICE

or ☐ Correspondence address below

I, (WE), hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF ADDITIONAL INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Lynn E.			Family Name or Surname	PATTISON		
Inventor's Signature	<i>Lynn E. Pattison</i>			Date	10/28/2004		
Residence: City	Highland	State	Michigan	Country	United State of America	Citizenship	American
Mailing Address	326 Clark						
City	Highland	State	Michigan	Zip	48357		

[Page 4 of 8]


Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1 1]

IN-5597

DECLARATION	Utility or Design Patent Application
--------------------	--------------------------------------

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	 <p>26922 PATENT-TRADEMARK OFFICE</p>	or <input type="checkbox"/> Correspondence address below
---	---	--

I, hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])	Douglas	Family Name or Surname	GROSSMAN
Inventor's Signature	<i>Douglas Grossman</i>	Date	25 Oct 2004
Residence: City	Fairview Park	State	OH
Country	United States of America	Citizenship	USA
Mailing Address	4355 Valley Forge Dr.		
City	Fairview Park	State	OHIO
Zip	44126		

[Page 5 of 8]

Declaration for Utility or Design Patent Application (PTO/SB/01) (1-1.1)

BEST AVAILABLE COPY

IN-5597


DECLARATION —	Utility or Design Patent Application
---------------	--------------------------------------

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	 26922 PATENT-TRADEMARK OFFICE	or <input type="checkbox"/> Correspondence address below
---	--	--

I, hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF ADDITIONAL INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])	Patrick J.			Family Name or Surname	BRENNAN		
Inventor's Signature				Date	25 Oct 04		
Residence: City		State		Country	United State of America	Citizenship	USA
Mailing Address	3438 Southfield Rd.						
City	Richfield	State	OH	Zip	44286		

[Page 6 of 8]

Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]

IN-5597

DECLARATION —

Utility or Design Patent Application

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label


26922
PATENT-TRADEMARK OFFICE

☐ Correspondence address below

I, hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF ADDITIONAL INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Jeffrey A.		Family Name or Surname	QUILL	
Inventor's Signature			Date	25 th Oct 2004	
Residence: City	State	Country	United State of America	Citizenship	U.S.A.
Cleveland Heights	OH	Czechia			
Mailing Address	3055 Euclid Heights Blvd				
City	State	Zip	44112		
Cleveland Heights	OH				

[Page 7 of 8]

Declaration for Utility or Design Patent Application (PTO/SB/D1) [1-1.1]

IN-5597

DECLARATION —

Utility or Design Patent Application

POWER OF ATTORNEY

☒ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

☒ Customer Number or Bar Code Label



26922

PATENT-TRADEMARK OFFICE

or ☐ Correspondence address below

I, hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name OF ADDITIONAL INVENTOR:



A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	William		Family Name or Surname	WURST	
Inventor's Signature	<i>William R. Wurst</i>		Date	25 OCT 2004	
Residence: City	ELYRIA	State OH	Country USA	United State of America	Citizenship USA
Mailing Address	268 NORTHFIELD DR.				
City	ELYRIA	State OH	Zip	44035	

[Page 3 of 5]

Declaration for Utility or Design Patent Application (PTO/SB/01) [1-1.1]